

RECEIVED

CENTRAL FAX CENTER  
DAVIS & BUJOLD, PLLC

→ USPTO CENTRAL

001

AUG 19 2010

Approved for use through 9/30/00. OMB 0851-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

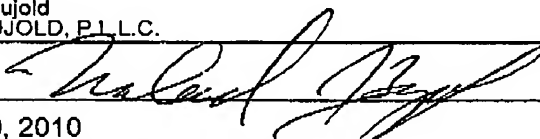
Application Number	10/566,620
Confirmation Number	
Filing Date	with an effective filing date of July 6, 2004
First Named Inventor	Matthias WINKEL and Bertram WENGERT
Group Art Unit	3655
Examiner Name	David D. Le Fax: (571) 273-8300
Total No. of Pages in this Submission: 22	Attorney Docket Number ZAHFRI P815US

## ENCLOSURES (check all that apply)

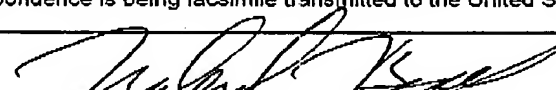
<input type="checkbox"/> Fee Transmittal Form (in Duplicate) <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response [21] <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) - Annotated Sheet(s) Replacement Sheet(s) New Sheet(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
--	--	---

REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	August 19, 2010	

## CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on <u>August 19, 2010</u> .	
Signature	 Date: August 19, 2010 (aam)